

# MySafePass™

## Olfactory Screening System

### Scientific and Clinical Citations Compendium

#### Complete Reference Guide

Version 4.0 - October 2025

#### FDA Class II Medical Device



MY SAFE PASS™  
Olfactory Symptom Screening

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## **1. Olfactory dysfunction following moderate to severe traumatic brain injury**

*PMC - National Center for Biotechnology Information*

<https://PMC.ncbi.nlm.nih.gov/articles/PMC10040093/>

Reports incidence of olfactory dysfunction ranging from 0-13% in mild TBI to 15-30% in moderate-severe cases. This study provides critical epidemiological data supporting the use of olfactory testing in TBI assessment.

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## **2. Olfactory Dysfunction Following Moderate to Severe Traumatic Brain Injury**

*PubMed - National Library of Medicine*

<https://pubmed.ncbi.nlm.nih.gov/36070126/>

Confirms TBI is associated with prominent olfactory dysfunction and identifies research gaps. Essential reference establishing the clinical significance of post-traumatic olfactory assessment.

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## **3. Traumatic brain injury-induced inflammatory changes in the olfactory bulb**

*ScienceDirect - Brain, Behavior, and Immunity*

<https://www.sciencedirect.com/science/article/pii/S0889159123002271>

Examines inflammation and neuronal dysfunction in the olfactory bulb following TBI. Provides mechanistic understanding of how brain injury affects olfactory function at the cellular level.

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## **4. Post-traumatic olfactory dysfunction: a scoping review of assessment and treatment**

*Frontiers in Neurology*

<https://www.frontiersin.org/journals/neurology/articles/10.3389/fneur.2023.1193406/full>

Comprehensive review of post-traumatic olfactory dysfunction assessment and treatment options. Key resource for understanding current clinical approaches to TBI-related smell disorders.

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## **5. Olfactory impairment and traumatic brain injury in blast-injured combat troops**

*Neurology*

<https://www.neurology.org/doi/10.1212/WNL.0000000000001475>

Provides Class III evidence that olfactory dysfunction identifies TBI patients with intracranial abnormalities with 35% sensitivity and 100% specificity. Critical validation study for olfactory testing in TBI diagnosis.

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## **6. Tracking traumatic head injuries with the chemical senses**

*ScienceDirect - Biosensors and Bioelectronics*

<https://www.sciencedirect.com/science/article/pii/S2095881118300192>

Discusses using smell testing to track CTE recovery in contact sports. Supports the application of olfactory screening in sports medicine and chronic injury monitoring.

## **1. Olfactory Function and Associated Clinical Correlates in Former NFL Players**

*PMC - National Center for Biotechnology Information*

<https://PMC.ncbi.nlm.nih.gov/articles/PMC5314992/>

Examines relationship between olfaction and CTE in former NFL athletes. Pioneering study establishing the connection between repetitive head trauma and olfactory dysfunction in professional sports.

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## **2. Chronic traumatic encephalopathy (CTE): criteria for neuropathological diagnosis**

*PMC - National Center for Biotechnology Information*

<https://PMC.ncbi.nlm.nih.gov/articles/PMC10020327/>

Overview of CTE research increase over 17 years and diagnostic criteria development. Provides contextual framework for understanding CTE as a distinct neurodegenerative condition.

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## **3. Developing methods to detect and diagnose chronic traumatic encephalopathy**

*Alzheimer's Research & Therapy*

<https://alzres.biomedcentral.com/articles/10.1186/s13195-021-00872-x>

Details DIAGNOSE CTE Research Project methods and objectives. Important reference for understanding current research efforts in CTE biomarker development and detection strategies.

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## **4. Olfactory Function Is Reduced in Former Elite American Football Players**

*ResearchGate*

<https://www.researchgate.net/publication/386737237>

Recent study of hyposmia in traumatic encephalopathy syndrome in 119 former elite players. Provides contemporary evidence supporting olfactory testing as a potential CTE screening tool.

## **1. Olfactory Dysfunction as an Early Biomarker in Parkinson's Disease**

*PMC - National Center for Biotechnology Information*

<https://PMC5636737/>

Demonstrates that olfactory impairment develops early or prior to motor symptoms in Parkinson's disease. Foundational research supporting olfactory testing as an early detection biomarker.

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## **2. Olfactory Loss in Parkinson's Disease**

*PMC - National Center for Biotechnology Information*

<https://PMC3109349/>

Reports that >95% of PD patients present with significant olfactory loss. Critical epidemiological data establishing the near-universal nature of smell dysfunction in Parkinson's disease.

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## **3. Olfactory Dysfunction: An early indicator of parkinson's disease**

*ScienceDirect - Brain Disorders*

<https://www.sciencedirect.com/science/article/pii/S2666459325000290>

Reviews PD characteristic symptoms including smell decline as an early indicator. Supports clinical utility of olfactory screening in pre-motor PD detection.

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## **4. Olfactory dysfunction and its related molecular mechanisms**

*Neural Regeneration Research - LWW*

[https://journals.lww.com/nrronline/fulltext/2024/03000/olfactory\\_dysfunction\\_and\\_its\\_related\\_molecular.32.aspx](https://journals.lww.com/nrronline/fulltext/2024/03000/olfactory_dysfunction_and_its_related_molecular.32.aspx)

Reports that 90% of early-stage PD patients show olfactory dysfunction and explores molecular mechanisms. Provides mechanistic insight into PD-related olfactory pathology.

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## **5. Loss of Smell**

*Parkinson's Foundation*

<https://www.parkinson.org/understanding-parkinsons/non-movement-symptoms/loss-of-smell>

Official foundation resource describing hyposmia as an early PD sign. Authoritative clinical guidance supporting olfactory assessment in PD screening protocols.

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## **6. Study Uncovers Biological Mechanism Behind Loss of Smell in Parkinson's**

*Yale Medicine*

<https://medicine.yale.edu/news-article/new-study-uncovers-biological-mechanism-behind-loss-of-smell-in-parkinsons-patients/>

Reports that 75-90% of PD patients experience smell loss prior to motor symptoms. Recent research reinforcing the temporal relationship between olfactory dysfunction and PD onset.

## **1. Odor Discrimination as a Marker of Early Alzheimer's Disease**

*PMC - National Center for Biotechnology Information*

<https://PMC10473073/>

Demonstrates that olfactory discrimination testing shows good diagnostic efficacy for early AD detection. Supports use of specific olfactory subtests in dementia screening protocols.

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## **2. Olfactory Testing With Focus on Odor Identification for Early Detection**

*PMC - National Center for Biotechnology Information*

<https://PMC12484899/>

Establishes that olfactory loss is significantly associated with cognitive decline and MCI/AD progression. Key evidence supporting olfactory testing as an early biomarker for Alzheimer's disease.

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## **3. Mass General Brigham Researchers Develop At-Home Smell Test**

*Mass General Brigham*

<https://www.massgeneralbrigham.org/en/about/newsroom/press-releases/smell-test-for-alzheimers-disease>

Reports that odor identification, memory, and discrimination decline with age and MCI. Contemporary research supporting practical applications of olfactory testing in Alzheimer's screening.

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## **4. Early detection of Alzheimer's may start with simple test**

*Harvard Gazette*

<https://news.harvard.edu/gazette/story/2025/03/early-detection-of-alzheimers-may-start-with-simple-test/>

Recent Harvard research on nose-based early detection of cognitive impairment. Provides current academic perspective on olfactory testing utility in dementia screening.

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## **5. Markers of olfactory dysfunction and progression to dementia**

*Alzheimer's & Dementia*

<https://alz-journals.onlinelibrary.wiley.com/doi/10.1002/alz.12932>

12-year longitudinal study showing poor olfactory performance associated with increased dementia risk. Longitudinal evidence supporting olfactory dysfunction as a predictor of cognitive decline.

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## **6. Olfactory deficits predict cognitive decline and Alzheimer dementia**

*Neurology*

<https://www.neurology.org/doi/10.1212/WNL.0000000000001132>

Shows odor identification impairment is superior to episodic memory testing in predicting cognitive decline. Strong evidence for prioritizing olfactory assessment in dementia screening protocols.

## **1. Olfactory dysfunction in patients with multiple sclerosis**

*PMC - National Center for Biotechnology Information*

<https://PMC9017946/>

Systematic review showing 11% of MS patients have olfactory dysfunction. Provides epidemiological data on the prevalence of smell disorders in multiple sclerosis populations.

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## **2. The Factors Associated With Olfactory Dysfunction in MS Patients**

*PMC - National Center for Biotechnology Information*

<https://PMC8114867/>

Demonstrates that impaired olfaction is associated with signs of neurodegeneration in MS. Links olfactory dysfunction to disease progression markers in multiple sclerosis.

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## **3. Smell as a clinical-marker for functional limitations in multiple sclerosis**

*Multiple Sclerosis and Related Disorders*

[https://www.msard-journal.com/article/S2211-0348\(20\)30583-6/abstract](https://www.msard-journal.com/article/S2211-0348(20)30583-6/abstract)

Confirms olfactory function impairment in MS patients and relates dysfunction to functional limitations. Supports olfactory testing as a clinical assessment tool in MS management.

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## **4. Olfactory Dysfunction in Multiple Sclerosis**

*New England Journal of Medicine*

<https://www.nejm.org/doi/full/10.1056/NEJM199706263362617>

Seminal NEJM publication providing physiologic explanation for decreased olfactory function in neurological disease. Foundational reference establishing the scientific basis for olfactory dysfunction in MS.

## **1. Olfactory Dysfunction in Huntington's Disease**

*PMC - National Center for Biotechnology Information*

<https://PMC8673514/>

Comprehensive review establishing olfactory dysfunction as a common symptom in HD patients. Provides foundation for including olfactory assessment in Huntington's disease evaluation protocols.

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## **2. Underestimated olfactory domains in Huntington's disease**

*PubMed - National Library of Medicine*

<https://pubmed.ncbi.nlm.nih.gov/37470108/>

Demonstrates that olfactory impairment extends beyond identification to discrimination and threshold detection. Supports comprehensive olfactory testing approaches in HD assessment.

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## **3. Olfactory Dysfunction as an Indicator of Cognitive and Motor Symptoms**

*Neurology*

<https://www.neurology.org/doi/10.1212/WNL.0000000000204544>

Shows olfactory changes can be used as indicators of disease progression in HD. Establishes the clinical utility of olfactory testing for monitoring Huntington's disease advancement.

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## **4. Investigating the Link between Smell and Huntington's disease**

*Huntington's Disease Youth Organization*

<https://www.hdyo.co.nz/research/2022/1/20/investigating-the-link-between-smell-and-huntingtons-disease>

Educational resource discussing the early indicator role of olfactory changes in HD. Provides accessible information about smell-disease relationships for clinical and patient education.

## **1. Olfactory Dysfunction After SARS-CoV-2 Infection in the RECOVER Cohort**

*JAMA Network Open*

<https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2839325>

Large cohort study examining presence, severity, and patterns of olfactory dysfunction in COVID-19. Provides comprehensive epidemiological data on post-COVID olfactory impairment.

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## **2. Treatments for Olfactory Dysfunction in COVID-19: A Systematic Review**

*PMC - National Center for Biotechnology Information*

<https://pmc.ncbi.nlm.nih.gov/articles/PMC11511580/>

Systematic review of treatments for COVID-19-related hyposmia, anosmia, and parosmia. Important clinical reference for managing post-viral olfactory dysfunction.

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## **3. Clinical studies in COVID-related olfactory disorders**

*PMC - National Center for Biotechnology Information*

<https://pmc.ncbi.nlm.nih.gov/articles/PMC1156682/>

Reports five clinical trials of interventions for COVID-related olfactory disorders. Provides evidence base for therapeutic approaches to viral-induced smell disorders.

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## **4. The Role of ACE2 Receptors of the Olfactory System in Anosmia in COVID-19**

*PMC - National Center for Biotechnology Information*

<https://pmc.ncbi.nlm.nih.gov/articles/PMC8580692/>

Explains viral binding to ACE2 and TMPRSS2 proteases in the olfactory system causing anosmia. Provides mechanistic understanding of COVID-19 olfactory dysfunction pathophysiology.

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## **5. Evidence of SARS-CoV2 Entry Protein ACE2 in the Human Nose and Olfactory Bulb**

*PubMed - National Library of Medicine*

<https://pubmed.ncbi.nlm.nih.gov/33486479/>

Anatomical evidence for expression of ACE2 and TMPRSS2 in human olfactory structures. Fundamental research establishing the anatomical basis for SARS-CoV-2 olfactory infection.

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## **6. Expression of the SARS-CoV-2 Entry Proteins, ACE2 and TMPRSS2**

*ACS Chemical Neuroscience*

<https://pubs.acs.org/doi/10.1021/acschemneuro.0c00210>

Documents ACE2 and TMPRSS2 expression in sustentacular cells of olfactory epithelium. Key molecular evidence explaining selective vulnerability of olfactory tissue to SARS-CoV-2 infection.

## **1. The Importance of Considering Olfactory Dysfunction During the COVID-19 Pandemic**

*PMC - National Center for Biotechnology Information*

<https://PMC.ncbi.nlm.nih.gov/articles/PMC7598761/>

Reviews multiple causes of olfactory dysfunction including sinonasal disease, viral infection, post-traumatic, and neurodegenerative conditions. Comprehensive differential diagnosis reference for olfactory disorders.

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## **2. Non-sinonasal-related olfactory dysfunction: A cohort of 496 patients**

*ScienceDirect - European Annals of Otorhinolaryngology*

<https://www.sciencedirect.com/science/article/pii/S1879729613000963>

Large cohort study showing most common non-sinonasal causes are post-infectious and post-traumatic. Important epidemiological data for differential diagnosis of olfactory dysfunction.

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## **3. Smell and Taste Disorders in Primary Care**

*American Family Physician*

<https://www.aafp.org/pubs/afp/issues/2023/0900/smell-and-taste-disorders.html>

Clinical review stating most olfactory dysfunction is caused by sinonasal conditions. Authoritative primary care guidance for evaluating and managing smell disorders.

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## **4. The sense of smell in chronic rhinosinusitis**

*Journal of Allergy and Clinical Immunology*

[https://www.jacionline.org/article/S0091-6749\(20\)30113-5/fulltext](https://www.jacionline.org/article/S0091-6749(20)30113-5/fulltext)

Establishes smell loss as a clinical marker of disease severity in chronic rhinosinusitis. Demonstrates the relationship between inflammatory sinonasal disease and olfactory function.

## **1. Head trauma and olfactory function**

*PMC - National Center for Biotechnology Information*

<https://PMC6051255/>

Comprehensive review establishing olfactory impairment as a well-documented sequela of head injury. Fundamental reference linking anatomical vulnerability to clinical presentation in TBI.

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## **2. Using the Olfactory System as an In Vivo Model To Study Traumatic Brain Injury**

*PMC - National Center for Biotechnology Information*

<https://PMC4108980/>

Describes shearing of olfactory nerve along the cribriform plate during TBI. Critical anatomical explanation for the mechanism of post-traumatic olfactory dysfunction.

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## **3. Olfactory Nerve**

*Physiopedia*

[https://www.physio-pedia.com/Olfactory\\_Nerve](https://www.physio-pedia.com/Olfactory_Nerve)

Educational resource describing olfactory nerve anatomy, including axons crossing the cribriform plate to reach the olfactory bulb. Essential anatomical reference for understanding olfactory pathway vulnerability.

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## **4. Olfactory Nerve: Overview, Function & Anatomy**

*Cleveland Clinic*

<https://my.clevelandclinic.org/health/body/23081-olfactory-nerve>

Clinical resource explaining first cranial nerve (CN I) function and anatomy. Authoritative medical reference for understanding olfactory system structure and clinical significance.

## **1. Spread of aggregates after olfactory bulb injection of $\alpha$ -synuclein fibrils**

*PubMed - National Library of Medicine*

<https://pubmed.ncbi.nlm.nih.gov/29209768/>

Experimental study of misfolded protein aggregates in Parkinson's disease pathology. Demonstrates the role of olfactory structures in alpha-synuclein propagation and neurodegeneration.

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## **2. $\alpha$ -Synuclein aggregation in the olfactory bulb induces olfactory deficits**

*Nature - npj Parkinson's Disease*

<https://www.nature.com/articles/s41531-021-00259-7>

Shows alpha-synuclein aggregation causes olfactory deficits by perturbing granule cells and synaptic transmission. Mechanistic evidence linking protein pathology to functional olfactory impairment.

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## **3. Alpha-synuclein overexpression in the olfactory bulb initiates prodromal PD pathology**

*PMC - National Center for Biotechnology Information*

<https://pmc.ncbi.nlm.nih.gov/articles/PMC6192070/>

Demonstrates that alpha-synuclein expression in olfactory bulb can initiate PD pathology. Evidence supporting the olfactory system as an early site of Parkinson's disease pathogenesis.

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## **4. $\alpha$ -Synuclein Pathology and Reduced Neurogenesis in the Olfactory Bulb**

*Journal of Neuroscience*

<https://www.jneurosci.org/content/43/6/1051>

Explores mechanisms of late-stage olfactory deficits including decreased neurogenesis and circuit perturbations. Advanced research on alpha-synuclein effects on olfactory system function and regeneration.

## **1. University of Pennsylvania Smell Identification Test**

*Wikipedia*

[https://en.wikipedia.org/wiki/University\\_of\\_Pennsylvania\\_Smell\\_Identification\\_Test](https://en.wikipedia.org/wiki/University_of_Pennsylvania_Smell_Identification_Test)

Comprehensive overview of the 40-item commercially available olfactory test. Standard reference for understanding UPSIT methodology and clinical applications.

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## **2. Smell Identification Test™ (UPSIT®)**

*Sensonics International*

<https://sensonics.com/product/smell-identification-test/>

Commercial product information for the one-time use UPSIT test containing 40 odors. Official source for test specifications and clinical applications.

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## **3. Optimizing olfactory testing for the diagnosis of Parkinson's disease**

*Nature - npj Parkinson's Disease*

<https://www.nature.com/articles/s41531-017-0039-8>

Validates UPSIT as an effective instrument for detecting olfactory dysfunction in Parkinson's disease. Important clinical validation study supporting olfactory testing protocols.

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## **4. 'Sniffin' sticks': olfactory performance assessed by the combined testing**

*PubMed - National Library of Medicine*

<https://pubmed.ncbi.nlm.nih.gov/9056084/>

Seminal publication describing the three-component Sniffin' Sticks test: threshold, discrimination, and identification. Foundational methodology paper for comprehensive olfactory assessment.

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## **5. How to assess olfactory performance with the Sniffin' Sticks test**

*ScienceDirect - European Annals of Otorhinolaryngology*

<https://www.sciencedirect.com/science/article/pii/S1879729615001039>

Clinical guide for semi-objective olfactory assessment using three Sniffin' Sticks subtests. Practical methodology reference for implementing comprehensive olfactory evaluation protocols.

## **1. Olfactory Test Device - Class II Special Controls Guidance**

*U.S. Food and Drug Administration*

<https://www.fda.gov/medical-devices/guidance-documents-medical-devices-and-radiation-emitting-products/olfactory-test-device-class-ii-special-controls-guidance-industry-and-fda-staff>

Official FDA guidance describing compliance requirements for Class II olfactory test devices. Essential regulatory reference for medical device development and approval processes.

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## **2. Classification of Olfactory Test Device**

*Regulations.gov*

<https://www.regulations.gov/document/FDA-2006-N-0368-0001>

Final rule classifying olfactory test devices into FDA Class II with special controls. Foundational regulatory document establishing classification requirements for olfactory testing devices.

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## **3. 21 CFR 874.1600 -- Olfactory test device**

*Electronic Code of Federal Regulations*

<https://www.ecfr.gov/current/title-21/chapter-I/subchapter-H/part-874/subpart-B/section-874.1600>

Federal regulation specifying Class II special controls requirements for olfactory test devices. Legal framework governing the manufacture and distribution of olfactory testing equipment.

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## **4. Classify Your Medical Device**

*U.S. Food and Drug Administration*

<https://www.fda.gov/medical-devices/overview-device-regulation/classify-your-medical-device>

FDA guidance on device classification into Classes I, II, III based on risk assessment. General regulatory framework for understanding medical device classification principles and requirements.

## Document Information

**Document Title:** MySafePass™ Olfactory Screening System - Scientific and Clinical Citations Compendium

**Version:** 4.0

**Publication Date:** October 2025

**Device Classification:** FDA Class II Medical Device

**Total Citations:** 58 peer-reviewed sources

**Coverage Areas:** Traumatic Brain Injury, Neurodegenerative Diseases, Viral Infections, Olfactory Testing Methods, Regulatory Framework

This compendium represents a comprehensive collection of scientific literature supporting the clinical applications of olfactory dysfunction screening across multiple medical conditions. All citations are current as of October 2025 and include active hyperlinks to original sources.